



DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Date:



# **WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Date:

## Work Order update only

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Design											
Doc/Data											
Equip/Tooling											
Handling/Pre											
Material											
Operator											
Offset/Setup											
Process											
Supplier											
Training											
Transport											
Unapproved											
FAULT CATEGORY											
Landing Gear			General								
Bending	Bend	Folio/Program	Outside Dimensions	Pressure/Forced							
Centre Not Concentric	BOM/Route	Grain	Over/Under tolerance	Set-up							
Cracks	Broken/Damage/Defect	Hardware	Part Incorrect	Temperature/Cure							
Crimp/Kink/Ripple/Wave	Burrs	Inspection Incomplete/Unqualified	Part Lost/Missing	Weld							
Cuffs	Contamination	Instructions Incomplete/Unclear	Part Moved	Wrong Stock Pulled							
Crushing	Countersink	Misaligned/off center	Positioned Wrong								
Heat Treat	Cut Too Short	Mislabeled	Power Loss/Surge								
Inspection Strip in Tube	Drawing	Misread									
Marks/Chatter	Drill Holes	Off-set									
Turning Sequence	Finish	Out of Calibration									
Wave/Twist in Tube	Fit/Function	Out of Sequence									

**Work Order ID 117145**

April-24-14 9:57:12 AM

**\*117145\***

Page 2

Item ID: D3464-7

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Float Step Mounting Plate

Stop

**\*NS2\***

Start Date: 4/23/14 Start Qty: 12.00

**\*12\***

Cust Item ID:

Required Date: 4/23/14 Req'd Qty: 12.00

**\*12\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

**\*130\***

Small Fab

Small Fab

Small Fab

Memo

Deburr if necessary.

0.00

0.00

0.00

0.00

140

**\*140\***

QC

Quality Control

QC5- Inspect part completeness to step on W/O

N/A

0.00

0.00

150

**\*150\***

Packaging

Packaging

Identify as per dwg & Stock Location: WA3

0.00

0.00

Memo

\*\*\* STOCK IN STEP CELL\*\*\*



(11) CFC 14.10.21

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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Work Order update only 

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other				
			Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Design											
Doc/Data											
Equip/Tooling											
Handling/Pre											
Material											
Operator											
Offset/Setup											
Process											
Supplier											
Training											
Transport											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Folio/Program <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>			
				Centre Not Concentric <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Set-up <input type="checkbox"/>			
				Cracks <input type="checkbox"/>	Broken/Damage/Defect <input type="checkbox"/>	Hardware <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>			
				Crimp/Kink/Ripple/Wave <input type="checkbox"/>	Burrs <input type="checkbox"/>	Inspection Incomplete/Unqualified <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Weld <input type="checkbox"/>			
				Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Moved <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>			
				Crushing <input type="checkbox"/>	Countersink <input type="checkbox"/>	Misaligned/off center <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>				
				Heat Treat <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>			
				Inspection Strip in Tube <input type="checkbox"/>	Drawing <input type="checkbox"/>	Misread <input type="checkbox"/>					
				Marks/Chatter <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Off-set <input type="checkbox"/>					
				Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>					
				Wave/Twist in Tube <input type="checkbox"/>	Fit/Function <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>					

**Work Order ID 117145**

April-24-14 9:57:12 AM

**\*117145\***

Page 3

Item ID: D3464-7

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Float Step Mounting Plate

Start Date: 4/23/14 Start Qty: 12.00

~~\*12\*~~

||

Cust Item ID:

Required Date: 4/23/14 Req'd Qty: 12.00

~~\*12\*~~

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

160

**\*160\***

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

14/04/2014

*AM-10.23*

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Date:



# WORK ORDER NON-CONFORMANCE / UPDATE

**QA Closed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Date:

## Work Order update only

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Suspected Unapproved	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other			
Part No. _____										
NCR No. _____										
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Design										
Doc/Data										
Equip/Tooling										
Handling/Pre										
Material										
Operator										
Offset/Setup										
Process										
Supplier										
Training										
Transport										
Unapproved										
FAULT CATEGORY										
Landing Gear			General							
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function							
			<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence							
			<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge							
			<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							
			<input type="checkbox"/> Other							

**Picklist Print**

Page 1

April-24-14 9:57:15 AM

Work Order ID: 117145

**\*117145\***

Parent Item: D3464-7

**\*D3464-7\***

Parent Item Name: Float Step Mounting Plate

Start Date: 4/23/14

Required Date: 4/23/14

Start Qty: 12.00

Required Qty: 12.00

**Comments:** IPP Rev: A New Issue 06-01-06 JLM  
 IPP Rev:B 09-01-14 now made on waterjet DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M6061T6B0.187X04.00 0		Purchased	No			100	f	18.9168	0.3753	4.740631		DAS 23 9-89	14-10-08

**\*M6061T6B0 187X04 000\***

6061-T6 Bar .187 x 4.00

Location	Loc Qty	Loc Code
MAT051	18.916842	
m128265	18.916842	128265

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Date:



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Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework Scrap Use-as-is Suspected Unapproved	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other			
Part No. _____											
NCR No. _____											
Root Cause		Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Design	<input type="checkbox"/>										
Doc/Data	<input type="checkbox"/>										
Equip/Tooling	<input type="checkbox"/>										
Handling/Pre	<input type="checkbox"/>										
Material	<input type="checkbox"/>										
Operator	<input type="checkbox"/>										
Offset/Setup	<input type="checkbox"/>										
Process	<input type="checkbox"/>										
Supplier	<input type="checkbox"/>										
Training	<input type="checkbox"/>										
Transport	<input type="checkbox"/>										
Unapproved	<input type="checkbox"/>										
FAULT CATEGORY											
Landing Gear				General							
Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Folio/Program	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>	Pressure/Forced			
Centre Not Concentric	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Set-up			
Cracks	<input type="checkbox"/>	Broken/Damage/Defect	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Temperature/Cure			
Crimp/Kink/Ripple/Wave	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Inspection Incomplete/Unqualified	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Weld			
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>	Wrong Stock Pulled			
Crushing	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Misaligned/off center	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>				
Heat Treat	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Other			
Inspection Strip in Tube	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Misread	<input type="checkbox"/>		<input type="checkbox"/>				
Marks/Chatter	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Off-set	<input type="checkbox"/>		<input type="checkbox"/>				
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>				
Wave/Twist in Tube	<input type="checkbox"/>	Fit/Function	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>				

DART AEROSPACE LTD	Work Order:	117145
Description: Float Step Mounting Plate	Part Number:	D3464-7
Inspection Dwg: D3464 Rev: A		Page 1 of 1

# FIRST ARTICLE INSPECTION CHECKLIST

## X First Article      Prototype

<b>Measured by:</b>	<b>Audited by:</b>	<b>Prototype Approval:</b>
Date: 9-89	Date: 9-89	Date: N/A

<b>Rev</b>	<b>Date</b>	<b>Change</b>	<b>Revised by</b>	<b>Approved</b>
A	06.03.27	New Issue	KJ/JLM	SJM

'OPY

NT

